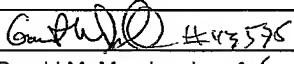


Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number

<i>Effective on 12/08/2004.</i> <i>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</i>		Complete if Known		
FEE TRANSMITTAL For FY 2009		Application Number	10/577,438-Conf. #3422	
		Filing Date	April 27, 2006	
		First Named Inventor	Takaji YOSHIMOTO	
		Examiner Name	T. A. Solola	
		Art Unit	1625	
TOTAL AMOUNT OF PAYMENT	(\$)	490.00	Attorney Docket No.	0171-1271PUS1

METHOD OF PAYMENT (check all that apply)				
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____				
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>02-2448</u> Deposit Account Name: <u>Birch, Stewart, Kolasch & Birch, LLP</u>				
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)				
<input checked="" type="checkbox"/> Charge fee(s) indicated below		<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17		<input checked="" type="checkbox"/> Credit any overpayments		

FEE CALCULATION															
1. BASIC FILING, SEARCH, AND EXAMINATION FEES															
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES										
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fees Paid (\$)</u>								
	Utility	330	165	540	270	220	110	_____							
	Design	220	110	100	50	140	70	_____							
	Plant	220	110	330	165	170	85	_____							
	Reissue	330	165	540	270	650	325	_____							
Provisional	220	110	0	0	0	0	_____								
2. EXCESS CLAIM FEES															
Fee Description															
Each claim over 20 (including Reissues) <u>52</u> <u>26</u>															
Each independent claim over 3 (including Reissues) <u>220</u> <u>110</u>															
Multiple dependent claims <u>390</u> <u>195</u>															
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; text-align: left; padding: 5px;"><u>Total Claims</u></td> <td style="width: 25%; text-align: left; padding: 5px;"><u>Extra Claims</u></td> <td style="width: 25%; text-align: left; padding: 5px;"><u>Fee (\$)</u></td> <td style="width: 25%; text-align: left; padding: 5px;"><u>Fee Paid (\$)</u></td> </tr> <tr> <td style="text-align: left; padding: 5px;">16</td> <td style="text-align: left; padding: 5px;">- 20 or HP</td> <td style="text-align: left; padding: 5px;">0</td> <td style="text-align: left; padding: 5px;">x 52.00 = 0.00</td> </tr> </table>								<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	16	- 20 or HP	0	x 52.00 = 0.00
<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>												
16	- 20 or HP	0	x 52.00 = 0.00												
HP = highest number of total claims paid for, if greater than 20.															
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; text-align: left; padding: 5px;"><u>Indep. Claims</u></td> <td style="width: 25%; text-align: left; padding: 5px;"><u>Extra Claims</u></td> <td style="width: 25%; text-align: left; padding: 5px;"><u>Fee (\$)</u></td> <td style="width: 25%; text-align: left; padding: 5px;"><u>Fee Paid (\$)</u></td> </tr> <tr> <td style="text-align: left; padding: 5px;">3</td> <td style="text-align: left; padding: 5px;">- 4 or HP</td> <td style="text-align: left; padding: 5px;">0</td> <td style="text-align: left; padding: 5px;">x 220.00 = 0.00</td> </tr> </table>								<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	3	- 4 or HP	0	x 220.00 = 0.00
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>												
3	- 4 or HP	0	x 220.00 = 0.00												
HP = highest number of independent claims paid for, if greater than 3.															
3. APPLICATION SIZE FEE															
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).															
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; text-align: left; padding: 5px;"><u>Total Sheets</u></td> <td style="width: 25%; text-align: left; padding: 5px;"><u>Extra Sheets</u></td> <td style="width: 25%; text-align: left; padding: 5px;"><u>Number of each additional 50 or fraction thereof</u></td> <td style="width: 25%; text-align: left; padding: 5px;"><u>Fee (\$)</u></td> </tr> <tr> <td style="text-align: left; padding: 5px;">_____</td> <td style="text-align: left; padding: 5px;">- 100 = _____</td> <td style="text-align: left; padding: 5px;">/50 = _____ (round up to a whole number) x _____</td> <td style="text-align: left; padding: 5px;">= _____</td> </tr> </table>								<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	_____	- 100 = _____	/50 = _____ (round up to a whole number) x _____	= _____
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>												
_____	- 100 = _____	/50 = _____ (round up to a whole number) x _____	= _____												
4. OTHER FEE(S)															
Non-English Specification, \$130 fee (no small entity discount)															
Other (e.g., late filing surcharge): <u>1252 Extension for response within second month</u> <u>490.00</u>															

SUBMITTED BY							
Signature				Registration No. (Attorney/Agent)	28,977	Telephone	(703) 205-8000
Name (Print/Type)	Gerald M. Murphy, Jr. <i>A/</i>			Date	<i>August 20, 2009</i>		